

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	8 minus 20=	*
INDEPENDENT CLAIMS	4 minus 3=	* 1
MULTIPLE DEPENDENT CLAIM PRESENT		

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
	345.00	OR		690.00
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	78
+130=		OR	+260=	
TOTAL		OR	TOTAL	768

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	*	Minus **	=
	Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL		OR	TOTAL	
ADDIT. FEE		OR	ADDIT. FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	*	Minus **	=
	Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL		OR	TOTAL	
ADDIT. FEE		OR	ADDIT. FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	*	Minus **	=
	Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL		OR	TOTAL	
ADDIT. FEE		OR	ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

**This Form is for INTERNAL PTO USE ONLY**  
**It does NOT get mailed to the applicant.**

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: \_\_\_\_\_

### Total Fee Calculation

Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
				Sm. Entity	Lg. Entity		
Basic Filing Fee	201/101	8		345	690	=	690
Total Claims >20	203/103	-20 =	X	9	18	=	
Independent Claims >3	202/102	-3 =	X	39	78	=	78
Mult. Dep Claim Present	204/104			130	260	=	
Surcharge	205/105			65	130	=	130
English Translation	139						
							818

### TOTAL FEE CALCULATION

Fees due upon filing the application:

Total Filing Fees Due = \$ 818

Less Filing Fees Submitted - \$ \_\_\_\_\_

BALANCE DUE = \$ \_\_\_\_\_

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Office of Initial Patent Examination